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USPTO	USPTO - Mail Stop Amendment	571-273-8300	
Date	Client/Matter Number		
November 17, 2006	211843-00044		
From	Attorney Number		
John S. Paniaguas	32347		
Phone	Fax		
312.902.5312	312.577.4532		

Total number of pages, including cover letter: 19
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Comments Serial No. 10/582,392; Filing Date: June 9, 2006

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11-17-06 15:06

From-KATTEN MUCHIN ROSENMAN 13129021061

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T-023 P.02

F-752

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PTO/SB/21 (09-06)

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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

10/582,392

Filing Date

June 9, 2006

First Named Inventor

Horsky

Art Unit

Not Yet Assigned

Examiner Name

Not Yet Assigned

Attorney Docket Number

221843-00044

ENCLOSURES (Check all that apply)

- | | |
|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application | <input type="checkbox"/> Landscape Tape on CD |
| <input type="checkbox"/> <input type="checkbox"/> under 37 CFR 1.52 or 1.53 | |

Remarks

 After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Katten Muchin Rosenman

Signature

Printed name

John S. Panagakos

Date

November 17, 2006

Reg. No.

31,051

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Mary Kay Daro

Date

November 17, 2006

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PTO/SB/17 (07-06)

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Effective on 12/08/2004
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)
FEE TRANSMITTAL
For FY 2006

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

0

Complete if Known

Application Number	10/582,392
Filing Date	June 9, 2006
First Named Inventor	Horsky
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	211843-00044

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number 50-1214 Deposit Account Name Katten Muchin Rosenman

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims Extra Claims Fee (\$)

Multiple Dependent Claims

Fee (\$)

- 20 or MP = x =

MP = highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee (\$)

Fee (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

Fee Paid (\$)

- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEES

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

Other (e.g., late filing surcharge):

SUBMITTED BY

Signature		Registration No (Attorney/Agent) 31,051	Telephone 312-902-5200
Name (Print/Type)	John S. Panagakos		Date November 17, 2006

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PATENT
211843/00044

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Horsky et al.)
Application No.: 10/582,392) Group Art Unit: Not yet Assigned
Filed: June 9, 2006) Examiner: Not Yet Assigned
Title: Method and Apparatus for)
Extending Equipment Uptime)
in Ion Implantation)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBSTITUTE SECOND PRELIMINARY AMENDMENT

Sir:

Prior to examining the instant application on the merits, please enter the following amendments:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper; and

Remarks/Arguments begin on page 16 of this paper.